

Louisiana Board of Pharmacy

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Product Order Form – Credential Roster

- 1 Please complete form online before printing it.
 2 Select the credential(s) for which you desire to purchase an electronic roster.
- 3 Select the preferred method of delivery.
- 4 Mail completed form and fee (check or money order, drawn on a bank located within the USA, payable in US dollars, to the order of Louisiana Board of Pharmacy) to the address noted above.
- 5 Please note that Board records are continually updated in real-time mode; therefore, information provided is accurate at the moment the list is produced.

Section 1 – Credentials Lists are available for the following credentials. The fee is \$150 for each list, as authorized by law (La. R.S. 37:1184).				
Pharmacists	Pharmacies	Pharmacy Interns	Technicians _	Technician Candidates
Indicate which data eleme	ents you wish to receiv	ve for each record in the lis	f	
Section 2 – Met The list is electronic; plea CD E-ma	ase specify your preferi	red method of delivery.		
Section 3 – Purchaser Information In the event we need to contact you in connection with your purchase, please provide the requested contact information.				
Name		Telepho	one No	
E-mail Address				
Company Name				
Mailing Address				
City, State, ZIP				
For Board Use: Check/N	MO #	Amt Rec'd	Date Ma	ailed

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